

SERFF Tracking #:	ANTX-128590083	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	Standard Life and Accident Insurance Company
TOI/Sub-TOI:	H08G Group Health - Intensive Care - Limited Benefit/H08G.000 Health - Intensive Care - Limited Benefit		
Product Name:	SL-VEROP		
Project Name/Number:	/		

Filing at a Glance

Company: Standard Life and Accident Insurance Company
 Product Name: SL-VEROP
 State: Arkansas
 TOI: H08G Group Health - Intensive Care - Limited Benefit
 Sub-TOI: H08G.000 Health - Intensive Care - Limited Benefit
 Filing Type: Form
 Date Submitted: 07/23/2012
 SERFF Tr Num: ANTX-128590083
 SERFF Status: Closed-Approved
 State Tr Num:
 State Status: Approved-Closed
 Co Tr Num:

Implementation
 Date Requested:
 Author(s): Patty Clavette
 Reviewer(s): Donna Lambert (primary)
 Disposition Date: 07/23/2012
 Disposition Status: Approved
 Implementation Date:

State Filing Description:

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General Information

Project Name: Status of Filing in Domicile:
 Project Number: Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Group
 Submission Type: New Submission Group Market Size: Small and Large
 Group Market Type: Employer Overall Rate Impact:
 Filing Status Changed: 07/23/2012
 State Status Changed: 07/23/2012 Deemer Date:
 Created By: Patty Clavette Submitted By: Kellie Jones
 Corresponding Filing Tracking Number:

Filing Description:

On behalf of the Company, I am submitting Rider SL-VEROP, which the Department Approved on June 26, 2012, under SERFF Number ANTX 128508286. The Rider's wording has not changed; however, the Schedule Page has been revised to include a different range of benefit options.

This Rider has not been marketed, so the Company will retain the same Form Number.

Thank you for your review of this submission.

Company and Contact

Filing Contact Information

Patty Clavette, Compliance Analyst patty.clavette@anico.com
 One Moody Plaza 17th Floor 832-864-3246 [Phone]
 Galveston, TX 77550 409-766-2080 [FAX]

Filing Company Information

Standard Life and Accident Insurance Company	CoCode: 86355	State of Domicile: Texas
One Moody Plaza, SSH MP, Ste. 200	Group Code: 408	Company Type: Health Insurance
Galveston, TX 77550	Group Name:	State ID Number:
(281) 538-4842 ext. [Phone]	FEIN Number: 73-0994234	

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? Yes
 Fee Explanation:
 Per Company: No

Company	Amount	Date Processed	Transaction #
Standard Life and Accident Insurance Company	\$50.00	07/23/2012	61100357

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Donna Lambert	07/23/2012	07/23/2012

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Disposition

Disposition Date: 07/23/2012

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Third Party Authorization		Yes
Form	OUTPATIENT DIAGNOSTIC X-RAY, LAB AND ADVANCED STUDIES BENEFITS RIDER	Approved	Yes

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Form Schedule

Lead Form Number: SL-VEROP							
Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/Action Specific Data	Readability Score	Attachments
1	Approved 07/23/2012	SL-VEROP	POLA	OUTPATIENT DIAGNOSTIC X-RAY, LAB AND ADVANCED STUDIES BENEFITS RIDER	Initial:		GENERIC VEROP.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

Standard Life and Accident Insurance Company

A Member of the American National Family of Companies – A Texas Corporation

Home Office: One Moody Plaza, Galveston, Texas, 77550

Toll-Free Telephone Number: 1-888-350-1488

(A Stock Insurance Company hereafter referred to as "Standard Life", "We", "Us", "Our" or "the Company")

OUTPATIENT DIAGNOSTIC X-RAY, LAB AND ADVANCED STUDIES BENEFITS RIDER

This Rider is a part of the Policy and Certificate to which it is attached. This Rider is subject to all the terms, maximums, conditions, exclusions and limitations of the Policy and the Certificate, except as stated herein.

RIDER EFFECTIVE DATE

Unless otherwise indicated below, this Rider is effective on the Certificate Effective Date for each Covered Person.

Rider Effective Date, if other than the Certificate Effective Date: _____

BENEFITS

We will pay the benefit amounts as shown in the Certificate Schedule of Benefits for this Rider. Those benefit amounts will be paid only if:

1. The Covered Person is not confined in a Hospital; and
2. Diagnostic X-Ray, lab and advanced studies* tests are ordered or performed by a Physician; and
3. Benefits are not excluded from coverage as shown in the Exclusions and Limitations provision.

RIDER TERMINATION

This Rider terminates on the earliest of the following:

1. the date the coverage under the Certificate for the Covered Person expires;
2. when the required premium is not paid within the grace period; or
3. the premium due date on or next following the date we receive the Covered Person's written request to terminate this Rider.

* Advanced studies tests consist of the following: Magnetic Resonance Imaging (MRI); Magnetic Resonance Angiography (MRA); Computed Axial Tomography (**CAT** Scans); Positron Emission Tomography (**PET** Scans); and Computed Tomography (**CT** scans).

Signed on behalf of Standard Life and Accident Insurance Company at Galveston, Texas.



Secretary

ADDITION TO THE SCHEDULE OF BENEFITS

RIDER: [NONE]

[Outpatient Diagnostic X-Ray, LAB and Advanced Studies Benefits Rider

X-Ray

Benefit Amount.....[\$70-\$300] Per Test

Maximum Benefit.....[2-4] Tests Per Calendar Year

LAB

Benefit Amount.....[\$20-\$100] Per Test

Maximum Benefit.....[3-6] Tests Per Calendar Year

Advanced Studies

Maximum Benefit Amount.....[\$1,000-\$5,000] Per Calendar Year

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification		
Comments:			
Attachment(s):			
READ - Slaico ppaca.pdf			

		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	N/A Rider Form		
Comments:			

		Item Status:	Status Date:
Satisfied - Item:	Third Party Authorization		
Comments:			
Attachment(s):			
SLAICO AUTHORIZATION el sig.pdf			

STANDARD LIFE AND ACCIDENT INSURANCE COMPANY
ONE MOODY PLAZA
GALVESTON, TEXAS

READABILITY CERTIFICATION

We hereby certify that form(s) SL-VEROP has (have) achieved a Flesch scale readability score that meets the minimum reading ease score as required by the state of Arkansas.

A handwritten signature in black ink, appearing to read "James P. Stelling", is positioned above a horizontal line.

James P. Stelling
Vice President , Health Compliance

Date: June 23, 2012



A MEMBER OF THE AMERICAN NATIONAL FAMILY OF COMPANIES
STANDARD LIFE AND ACCIDENT INSURANCE COMPANY
One Moody Plaza, Galveston, Texas 77550-7999

December 30, 2010

Commissioner of Insurance

Re: Letter of Authorization

Dear Sir or Madam:

This letter authorizes Patty Clavette, an independent contractor, to submit health forms on behalf of the Company.

Sincerely

William H
Watson III

Digitally signed by William H
Watson III
DN: cn=William H Watson III,
c=US, o=American National,
email=bill.watson@anico.com
Date: 2011.01.21 09:44:36
+06'00'

William H. Watson, III

Patty Clavette
patty.clavette@anico.com 225.677.9015 fax 409.766.2080